## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **OORPORATION** ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 24 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT** # N9600000354 (8)

**RESTORATION & EVANGELISM ADVANCED THRU COMMUNITY** 

TRAINING, INC.						
Principal Plac	ce of Business	M	Mailing Address			T CONTINUE OUR CHAIN BANK DOWN BOTH BEING DOWN BRIND WHICH BANK DIEN HER
2511 NORTH GRADY TAMPA FL			2511 NORTH GRADY TAMPA FL			3. Date Incorporated or Qualified
						01/22/1996
•						4. FEI Number Applied For
2. Principal Place of Business			2a. Mailing Address			59-3357848 Not Applicable  5 Codificate of Status Posited S8.75 Additional
21		26	26			5. Certificate of Status Desired Fee Required
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.		-	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State			City & State			Trust Fund Contribution Added to Fees  7. Is this nonprofit corporation a homeowners association?
23		28				☐ Yes 🔃 No
Zip .	Country		Zip	Count	ry	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
24 '	9. Name and Address of C	29 urrent Regis	tered Agent	30		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent
				8	1 Name 1	hito On ada
FOUNTAIN, JAMES E JR					2 Street Ad	dress (P.O. Box Number is Not Acceptable)
10525 CHADBOURNE DR						press (PO Box Number is North Ceptable) Circle
TAMPA FL 33624				6	Lu	tz.
	$\bigcirc 1$			8	4 City	FL 85 32549
11. Pursuant	to the provisions of Socions 61	6502 and 6	17.1508, Florida Stat	tutes, the abo	ve-named co	progration submits this statement for the purpose of changing its registered
office or agent. I a	registered abent, or both, in the am familiar with, and accord the	ciale of Flori pligations o	da. Such change wa: f, Section 617.0503, l	s authorized I Florida Statut	by the corpor es.	orporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
SIGNATURE	W Con VIII VA	OXX —				
12,		ed aged: and little S AND DIREC		OTE: Registered A	gent signature req	uured when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	T/PD	O AND DINE	DELETÉ	1.1 TiTu		Change Addition
NAME	WHITE, RANDY A			1.2 NAM	E	
STREET ADDRESS	3806 SAN PEDRO			1.3 STRE	ET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33629	$\overline{\Psi}$		1.4 C/TY		
TITLE	VD		DELETE.	2.1 TITLE		☐ Change ☐ Addition
NAME	FOUNTAIN, JAMES 10525 CHADBOURNE DR	,		2.2 NAM		
STREET ADDRESS CITY-ST-ZIP	TAMPA FL 33624	ı			ET ADDRESS   -ST-ZIP	
TITLE	TD TD		DELETE	3.1 TITU		Change Addition
NAME	WHITE, FRANK			3.2 NAM	E	
STREET ADDRESS	3606 WAVERLY CIRCLE	~		3.3 STRE	ET ADORESS	
CITY-ST-ZIP	TAMPA FL 33629	$\mathcal{D}_{\perp}$		3.4. CITY	-ST-ZIP	
TITLE	8		☐ DELETE	4.1 TITLE	Į.	Change Addition
NAME	MALLAN, JENNIFER			4, 2 NAN		
STREET ADORESS	2511 NORTH GHADY TAMPA FL	$\mathcal{T}$			ET ADDRESS	
CITY-ST-ZIP TITLE	IAMPA FL		☐ DELETE	4.4 CITY 5.1 TITLE		Change Addition
NAME	1			5.2 NAM	1	
STREET ADDRESS					ET ADDRESS	
CITY-ST-ZIP				5.4 CITY	-ST-ZIP	
TITLE			☐ DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAM	E [	
STREET ADDRESS					ET ADDRESS	
CITY-ST-ZIP	cortifu that the information aurol	det with this	iling does not qualify	6.4 CITY	-ST-ZIP	in Section 119 07/3Vi) Florida Statutes I further certifu that the information
indicated officer or Block 12	fon this annual report or suppler director of the corporation or the or Block 13 if changed, or on ar	nerval annue o receiver or netterment	I report is true and a trustee empowered to with an address.	ccurate and to execute this	hat my signa s report as re	in Section 119.07(3)(i), Florida Statutes. I further certify that the information ture shall have the same legal effect as if made under oath; that I am an equired by Chapter 617, Florida Statutes; and that my name appears in